

《Article》

Developing an ESP Curriculum: English for Medical Clinics ***Mohammad Umar FAROOQ ******Abstract**

The article is an attempt to (i) develop an ESP curriculum specifically related to medical secretary English, (ii) implement in a classroom, and (iii) examine whether it would be helpful for learners. In this regard, employing a theoretical model of ESP materials' design, first a need analysis is conducted to decide the contents of a syllabus. In view of the syllabus, materials are designed following the instructions given in the model. Lastly, the effectiveness of the curriculum is argued based on the ESP learning theories and feedback comments given by the course participants. Implications are discussed as regards how the curriculum can be used for a wider range of English required in medical offices such as English for nurses, nurse-teacher-training staff, dental assistants and welfare office secretaries.

1. Significance of the study and objectives

We all hear, read and probably take it granted that English is an important language to be taught in Japan not only at elementary schools through universities but also at companies and other educational centers for children and adults. This is also true that a large number of academic institutions organize programs for study abroad ranging from one week to a year. However, an important question is whether English, especially the spoken English is important in everyday life for ordinary people in general and students in particular in Japan. For instance, at what context spoken or communicative general English is crucial in everyday life in Japan as compared with countries such as China, Korea, India, Pakistan, Germany, France, Singapore, and several other countries in Africa, Asia and even Europe. The issue will not be expanded here as it's not the main topic of research in this article. My personal understanding is that unfortunately Japanese people have extremely few places and occasions to employ English. This is more true for using general English at work places where as almost all companies and enterprises have enough bilingual experts who can easily handle the job mainly because there is not too much work on a regular basis. Same is the case at universities, schools, and formal and informal educational centers. In other words if a majority of employees at work places are unable to communicate in English fluently, it doesn't create any major difficulties at work.

However, the situation is far different at places and occasions where English (both written and spoken) is used for Specific Purposes (ESP). This may include English used at companies for export, import, sales, negoti-

* 2010年12月10日受理

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ation, presentation, external written communication; and commercial places such as airport counters, airplanes, hotel counters, hospital information counters, doctor offices, dentist offices, travel agencies, foreign remittance at banks counters, and many other places where the context is specific. At places and context described above, ESP is not necessarily used on a daily basis, but it is used much more frequently than that of general English. In other words, in contrast to general English which is likely to be handled by few experts, there is a demand for employees to learn English used for specific purposes. In this regard, according to Hutchinson and Waters (1995:19) “ESP, then, is an approach to language teaching in which all decisions as to contents and method are based on the learners’ reason for learning.” Concerning related research in Japan, Cleminson et al (2008) examined both the needs of the students taking the course and the target workplace in order to produce suitable materials, and they identified some of the English skills necessary for medical secretaries to work in Japan. It is safe to state here that overall the ESP is a need for all employees to master and for students to learn for some of the obvious reasons below: ESP dealing with a specific area is simplified and hence may motivate its learners simply because they view it a real need at work places. Furthermore, vocabulary, expressions and usage are limited and easier to learn in the limited classroom hours.

HOSPITAL or CLINIC	address & access	Reception hours	specialty	language	Additional notes
<p>phone</p> <p>Oishi Family Clinic 大石ファミリークリニック (external link) TEL: 052-722-1133</p>	<p>16-7, Honen-cho, Chikusa-ku (Imaiki subway sta.) 名古屋千種区豊年町16-7 (5-min. walk from Imaiki Sta.) Get off at Imaiki Sta. on the Higashiyama or Sakuradori Subway Line, take exit 1. After you cross Miyakodori 2(都通2) intersection, turn left at the first corner. Oishi Clinic is on the left. map</p>	<p>9:00-12:00 ○ ○ ○ ○ ○ ○ 18:00-20:00 ○ ○ ○ ○ ○ ○ Closed: Sunday, holiday, year-end, New Year's holiday</p>	<p>Internal medicine Surgery Orthopedic surgery Urology Rehabilitation Med. Proctology Anesthesia</p>	English	English Dr. Mutsuo Oishi/male
<p>Kato Byoin 加藤病院 TEL: 052-751-1596</p>	<p>2-15, Suemori-dori, Chikusa-ku 名古屋千種区半蔵通2-15 (3-min. walk from Kakuozan Sta.) Get off at Kakuozan Sta. on the Higashiyama Subway Line. Take exit 3. Turn right. Walk 150m. map</p>	<p>9:00-12:00 ○ ○ ○ ○ ○ ○ 17:30-19:30 ○ ○ ○ ○ ○ ○ Closed: Sunday, holiday, year-end, New Year's holiday pic</p>	<p>Internal medicine Surgery Orthopedic surgery Urology Rehabilitation Med. Proctology</p>	English	-
<p>Higashiyama Naika Shonika Clinic Higashiyama kenkoKanri Center 東山内科-小児科クリニック 東山健康管理センター (external link) TEL: 052-781-1235 052-781-6500(reservation only/24hr)</p>	<p>5-103, Higashiyama-dori, Chikusa-ku 名古屋千種区東山通5-103 Get off at Higashiyama-Koen Sta. on the Higashiyama Subway Line. Take exit 4. Turn right and turn right again at the first corner. Just hop, skip and jump from the station. (1 min. from the station)</p>	<p>9:00-12:00 ○ ○ ○ ○ ○ ○ 2 17:00-19:00 ○ ○ ○ ○ ○ 1 3 1: 13:30-17:00 2: 10:00-13:00 3: 14:00-18:00 (regular home visit only)</p>	<p>Internal medicine Surgery</p>	English	-
<p>Serizawa Clinic 沢沢クリニック 052-775-1900</p>	<p>4-6 Chiyogasaki, Chikusa-ku 名古屋千種区千代ヶ丘4-6 Get off at Inokoshi Chugaku-mae 猪子石中学校 bus stop.</p>	<p>9:00-12:00 ○ ○ ○ ○ ○ ○ 16:30-19:00 ○ ○ ○ ○ ○ ○ Closed: Sunday, holiday,</p>	<p>Internal medicine Surgery</p>	English	English Dr. Kiyohito Serizawa

Table 1: English-Speaking Doctor, Dentist (clinic), Midwife and Acupuncturist

Table 1 is taken from the Internet (see Kikuko’s website, 2010). The website informs a list of medical clinics and dental offices where non-Japanese patients can use be assisted by foreign languages including English. According to it, there are at least 70 hospitals/clinics/dentists/doctors in Nagoya area.

These clinics inform their specialties, office hours, and the directions/locations of the clinics. In other words, this is an authentic study material for the ESP students. It may not only help learners study the target medical information, it also motivates them in that they see their work places right in front of them. It is worth to men-

tion here that such places in big cities like Tokyo, Yokohama, Osaka, and Kobe will be in much more large numbers than in Nagoya. This demand of employing foreign-language-speaking staff especially English, needs explanation. Approximately three years ago at the time when the writer started to teach this course there was not so much information on the internet. This implies a sudden increase of medical office places that provide service in English. There are other important reasons as well for this increase. We all are aware of the increasing number of foreign residents in Japan for the past few years. They include foreigners from Brazil, Peru, and other neighboring countries (factory workers); also from China (workers in factories), Pakistan (used car related businessmen and dealers), India (IT related workers) and its neighboring countries like Bangladesh, Sri Lanka; and many foreigners from African subcontinent. There is always a large group of language teachers – where the number has been increasing because of the introduction of English in the 6th grade of elementary schools – mostly from English-speaking countries. Foreigners from all these countries have generally been living with their families which obviously make the total number of foreign residents even larger. On the other hand, many foreign students lately visit Japan for formal and informal education at universities and language centers. An example of this is the number of foreign students at Nagoya University of Foreign Studies that ranges from 100 through 150 in each semester. Most of the foreigners, good at English, can speak Japanese at a survival level, but unable to communicate at specific places such as hospitals and clinics. Therefore, hospitals and other medical offices realize the demand and employ English-speaking staff. There is still another reason that relates to international marriages in Japan. The marriages where the spouse is a non-Japanese has been increasing very rapidly as compared with 20–30 years ago when there were very few international couples in Nagoya area. What is common among these international marriages is that almost all the foreign spouses are able to communicate in English. Other important languages seem to be Chinese and Spanish. Therefore, many hospitals in Table 1 have staff capable to use 3 languages or more, whereas English seems to be the dominant.

Research questions

Based on the information and reasons outlined above, there is an urgent demand of focusing on a curriculum of English related to medical offices with special attention to Medical Secretary English.

The general objectives of this article are (1) to look for ways for developing an ESP curriculum related to medical secretary English, (2) practically implement it to the classroom and (3) examine whether it would be helpful for its learners. The specific research question addressed is the following. Will the ESP curriculum for medical secretary English help students? The report will first, briefly discuss the concepts and definitions relevant to the topic; next, describe the steps and procedures involved in developing an ESP curriculum for Medical Secretarial English; and last, discuss the outcomes of the study.

2. Concepts and definitions

A detailed account of the ESP is provided by Hutchinson and Waters (1995). They discussed the overall objectives of the ESP, and that how and why it differs from the General English. They also informed in great detail the description of the approaches of an ESP course design, its applications and the role of an ESP teacher. This section, however, briefly informs the relevant concepts and definitions, and their details with applications in subsequent sections of the article.

The ESP is basically related to developing courses to meet the demands and needs of learners. What is mainly involved in the course design is termed as the *Need Analysis*. Two fundamental concepts of the need analysis are crucial in developing an ESP curriculum. They are termed as *Target Needs*, and the *Learning Needs*;

whereas the former relates to gathering information about the language being learned in the ESP course; and the later focuses on the course itself. The target need analysis requires to know the purpose of learning; the style of learning; the content areas; people with whom the language will be employed in the future, their knowledge and positions at their work places; and the places where the language is likely to be used. On the other hand, the learning need analysis seeks the information such as the reasons of participants to take the course; the style of the course in which it could be taught; kinds of teachers, their knowledge and their teaching abilities; kinds of learners, their English, social and cultural background; the place of environment (e.g. school or work place) where the course will take place; and the length and frequency of the course.

Next important element is to make a decision on the materials design in the light of a theoretical model. In this regard, a recommended model comprises four elements. They are *Input*, *Content* focus, *Language* focus, and the *Task* (see Fig 1). Input refers to the text in use depending on the need as has been defined through the Need Analysis. In order to accomplish the task, language and contents will be drawn as required.

How does the theoretical model function? The main purpose of the model is to focus on the task, and use the required language and content provided in the input in order to finish the task. In doing so, the students are likely to use their own knowledge and abilities to perform the task. Additional input may relate to the assistance given by the teacher in the form of answering students inquiries or making suggestions. In other word, the model shows a general framework in which the final task is done.

3. The ESP curriculum for medical secretarial English

The term ‘curriculum’ used here comprises (1) Need Analysis, (2) Syllabus, and (3) Materials Design, and (4) Methodology. In view of the model described previously, the methodology further relates to the term ‘project’ which is the same as a ‘classroom activity’.

3. 1 Need analysis: Background

The curriculum, required for medical secretary students (year 2) of Nagoya University of Arts and Science Junior College, was taught in one semester of 15 lessons each of 90-minute long. There were three groups, each of about 10–15 female students. The students’ major was related to Medical Secretary. The course, called as Medical Secretary English, was expected them to study the basic English used in medical clinics.

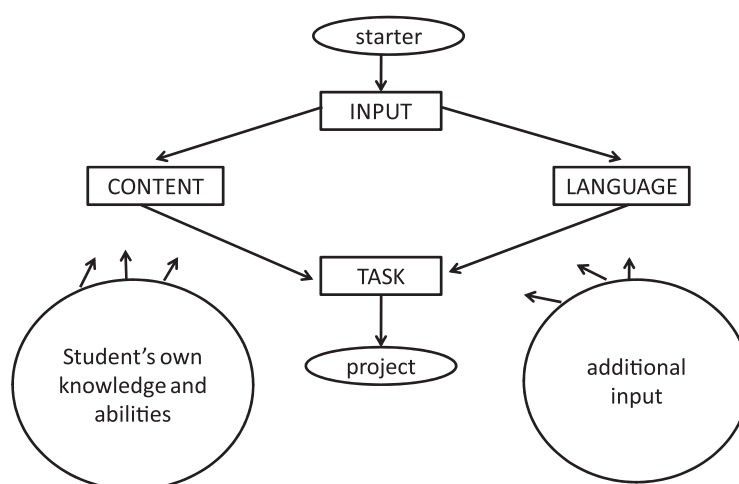


Figure 1: An expanded materials model
Adopted from Hutchinson and Waters (1995: 118)

3. 2 Need analysis: Target needs

The students needed the language to use at work in medical clinics, nursing homes, and welfare centers in Japan particularly in Aichi prefecture and Nagoya city. Specifically their work was related to (i) face-to-face encounters with patients, (ii) telephone communication, and occasionally written communication. The students were expected to use language both with native and non-native speakers of English who are likely to communicate with a variety of accents, depending on their countries. Therefore, the key factor for them was to grasp what was said rather than to speak out. The language was assumed to be used mainly at information counters or front desks. The frequency of the use of the language was unpredictable, but certain to use at the time any patient visited the hospital.

3. 3 Need analysis: Learning needs

Basically the course was optional, however, most of the students were encouraged to attend regularly as it may help them at the time of job hunting. The students were at a basic level of English proficiency, and have studied English for 6 years before entering the 2-year junior college. A majority of the students had also attended other courses of general spoken English for 2 semesters. In their major study, the students had experience of visiting hospitals, but had no experience of as how, when and at what context/situation English can be used at work. Students were assumed to be shy, hesitant to initiate, but willing to learn if the class was interesting. The course was conducted in a specially designed classroom of enough space for performing various activities. The class room also had certain medical equipments to use during activities such as a weighing machine, a height measuring machine, a blood pressure equipment, and several charts describing medical terms in Japanese, and a visual description of human body parts.

3. 4 Syllabus

Based on the information above through the ‘need analysis’, the following contents were selected to teach during the 15 lessons.

1. Meeting patients and helping them to fill in the *Medical History* form. The information was extremely important to master as almost all the patients in Japan are required to fill that out.
2. Providing certain information to the callers, through telephone communication. They may include opening/closing time, directions to the clinic, and making appointments.
3. Greeting patients at information counters; interacting for checking personal information of patients; dealing with medical insurance papers; giving medicines with instructions on as how to take them; and handling payment procedures.
4. Giving directions outside and within the hospitals; making brief announcements; and giving instructions in the doctor’s office such as ‘take off your shirt’, ‘lie down on the table’, ‘open your mouth’.
5. Learning how to pronounce common diseases, commonly used medical terms and fields, and medicines. This is the most crucial part of the course syllabus as most of the Japanese students can hardly pronounce or initiate to pronounce the unfamiliar words.
6. As was mentioned above the most important skill was not speaking, but to improve listening. Therefore, it was decided to have students understand natural speed English and try to initiate in communication since their work require them to talk at information counters, an open public place.
7. Students were expected to be taught as a basic step the Survival English Prompts in order to employ with patients at the time of communication breakdown. Common examples may include ‘Pardon me?’ ‘Would you please say that again / more slowly?’ ‘I’m sorry, I don’t understand. ‘What do you mean?’

8. Using the prompts in (7), students were prepared to respond to natural speed questions ranging from simple/short to more complicated and longer with authentic vocabulary.
9. The media of the course was decided as English and Japanese partly because the students were at a basic level, and partly because they required the bilingual skill to use at the hospitals by communicating with the foreign patients on one hand, and on the other hand, providing information to the Japanese staff. Furthermore, students were instructed to use special uniform during the activities, and work in pairs or small groups. All efforts have been made to have the students realize that the course is important to understand and master its contents.
10. Lastly, the class level was intentionally made a little above the learners' learning level in order to take place the learning in accordance with Krashen (1982) theory, but at the same time amusing in order to get students' willingness to study, as the hospitals in Japan have foreign patients lately, and the number has been increasing very rapidly because of an increase of foreign workers and foreign students in Japan.

3. 5 Materials design

3. 5. 1 Input

In view of the 'Expanded Materials Model 1 (Figure 1), the following section outlines the main projects or classroom activities by indicating mainly the role of language focus and/or the content focus.

The initial attempt was to prescribe an available textbook as has been a common practice especially at Japanese educational institutions. However, a detailed search of a required textbook was discouraging. Most of the textbooks were based on lengthy dialogues with much emphasis on general medical terms and vocabulary. Besides the cost, there was a risk of discouraging the students who have just begun a new important course. Therefore, in selecting the texts based on the Need Analysis (as INPUT, see the model) we employed the following criteria (adapted by Hutchinson and Waters, 1995: 121).

- It should be a naturally occurring and authentic piece of communication which is likely to be modified or rewrite to use in the classroom actively. Moreover, it is preferable to be used in Japan.
- It should be suited to learners' level, needs and interests in that it could help them make their job hunting process more motivating.
- It should be generally useful, and practical for classroom activities. One text that matches the above criteria is outlined in Materials Sample 1.

3. 5. 2 A Materials design model: Sample material

The expanded model can be used for materials of a length of an activity or project which normally takes 90 minutes to cover all the stages. Below is a sample project to give a general idea on which all of the materials' design is based on, and how the model works in practice in one of our classroom materials (See Materials Sample 1).

Project: With the use of the expressions (language) in the Materials Sample 1 reply to a patient's (a new visitor) telephone call, and request for his/her contact information (name, telephone, address) for further correspondence.

On the phones

Project: With the use of the expressions (language) in the material reply to a patient's (a new visitor) telephone call, and request for his/her contact information (name, telephone, address) for further correspondence.

To enjoy
communication do
NOT look at your
partner's
Language Box!

Student A: Medical Secretary Language

- Good Morning, Seirei Hospital, can I help you?
- May I ask your first name?
- Could you tell me your last name, please?
- Could you spell that please?
- Would you mind telling me your telephone number?
- I'd like to know your home county address.
- Thank you for calling.
- Have a nice day.

To communicate naturally use below:
• I beg your pardon? / Pardon me? / Sorry?
• Could you please speak loudly?
• 052-701-9945?
• Yes / I see / Okay.

Student B: Patient Language

<u>First name?</u>	[Steve, Peter, Arif, Selly, Trinal]
<u>Last name?</u>	[Martin, Khan, Peterson, Adams, Trung]
<u>Telephone number</u>	[331-1205, 902-1288, 555-5475, 991-1909, 220-1212]
<u>Home county address?</u>	[42 Park Street, 76 Maple Street, 79 Light Road, 66 Harbor Drive]

Materials Sample 1: Material design for a real-life telephone simulation project

Starter: With the task contents in mind, students are invited to say words, phrases, and expressions specifically in Japanese language. As the students use their native language, it may help them in many ways: They can organize a general framework as how to start, carry on, and end a telephone talk; also make them think to use polite language at work (using their background of part-time works in real life). It will create context of knowledge for understanding the input. It will also increase their interest in the project, and the required expression in English which will further help them understand and remember the target language.

Language: Students repeat what they have done in the starter but this time in English using the language written on the above handout and knowing new language with the help of the teacher and classmates. Although the students work on the language, they naturally think of its meanings using their background knowledge and real-life experience at work.

Content: Students use their knowledge and abilities reviewed or developed in the 'starter' to understand the meanings of all the language expressions in order to complete the task.

Task: Students are now fully prepared to begin the task. They go back to the input, create a mental plan as how to carry on the task, and complete the task using the expressions they have learnt in the previous stages. During the activity, students are provided with the additional input by the teacher in the form of required expressions. After the completion of the project, students change new partners, and start the same project again by going to the input. The final phase of the project will be to have students (individually) who are willing to talk with the teacher by imaging the real-life situation as a simulation project by using a real object (mobile), place (counter) and in front of audience (classmates).

3. 5. 3 Methodology

Project 1: Getting familiar with the Survival English Prompts

Through various activities, students master survival English prompts usage through *Shadowing*, practicing alone on a phone, pretending to talk with someone on a phone. The activities are mainly content focus as the language is simple.

Project 2: Getting familiar with Natural Speed Listening

Focusing both on language and content, students listen to a question spoken in natural or relaxed speed. They are required to respond promptly (if understand) or employ prompts learned in the project 1 to first interact with the teacher, understand the content and if like respond to the question. The questions are graded from simple/short to complicated/long (see Materials Sample 2).

Project 3: Pronouncing unfamiliar medical terms/phrases

Focusing mainly on the language, students individually try to read out/pronounce an unfamiliar medical term by breaking the word into its parts. For instance, description (des-crip-tion) or vapor (va-por).

Project 4: Medical Secretary English

Focusing on language and content, students in pairs and small groups work on projects similar to the one given above (see Materials Sample 1). Based on the contents in the syllabus various kinds of methodologies are used ranging from information gap through role-play or classroom dramas. Once the students go through the language and contents written in the 'input', they are required to practice with the teacher in natural speed English in the way it may occur in the hospitals/clinics. In doing so, the role of the teacher is always a patient.

Natural Speed Listening Questions' Sample

Level 1: Exemplified Questions

I often meet friends on Saturdays. What do you do on weekends?

Level 2: Short and Simplified Questions

What subject did you dislike in high school?

Level 3: Multiple-answers Questions

How many houses have you changed in so far, where and why?

Level 4: Longer Questions

Where'd you like to go in Asia if you've a lot of free time and enough money to spend?

Level 5: Formal / Polite Questions

I'd like to go to Chubu International Airport. Would you please tell me where I can take the bus?

Level 6: TPR Requests

Would you please wave your hand if your blood type is B or AB?

Level 7: Formal vocabulary based questions

Do you have an optimistic or a pessimistic personality?

Level 8: Tag Questions

You don't have a driving license, do you?

Level 9: Opinion-based Questions

What do you think about young people manners in Japan?

Level 10: Longer Answer Questions

Could you tell me how you studied English in your high school?

Level 11: Questions with an assumption

If you had a month holiday how would like to spend?

Level 12: Questions with an unexpected happening

You are very tired and hungry. You entered an expensive restaurant and ordered a big and expensive meal. But, when started to eat you noticed that you have no money in your purse and also forgot to have your credit and cash cards. What will you do?

Use below to interact.
Sorry?
Pardon me?
Will you please say that slowly?
What do you mean?
I don't understand.
I'm sorry, I can say in English.

Materials Sample 2: Material design for Natural Speed Listening project

4. Effectiveness of the curriculum

The objective of the study was to develop an ESP curriculum with special emphasis to medical secretary English. It began with the research question ‘Will the ESP curriculum for medical secretary English help the students?’. The question can be answered in affirmative based on the discussion as below in the light of ESP theories of learning, and feedback comments from the course participants (see Appendix).

4.1 A rich learning environment

During the entire course, and the associated materials and activities all efforts have been made to create an enjoyable and friendly learning atmosphere in order to attract students’ attention that were confirmed through the students’ feedback comments. In this regard, Hutchinson and Waters (1995: 141) also suggested that “[t]he most relevant materials, the most academically respectable theories are as nothing compared to the rich learning environment of an enjoyable experience. This is an aspect of pedagogy that is taken as granted with children but is too often forgotten with adults. It doesn’t matter how relevant a lesson may appear to be, if it bores the learners it is a bad lesson.”

4.2 Natural speed listening

According to Krashen, “learners must be affectively positive and receptive in order for “natural” acquisitional process to function” (Krashen 1982 cited in Chaudron 1993: 134).

The project/activity of responding to natural speed questions help students in several different ways. First, it provides them an opportunity to interact with teacher with complete freedom in that two speakers interact outside classrooms. Second, it gives them a chance to learn how, when and what to ask at the time of difficulties in communication. For, instance, if a natural speed question is asked, students find themselves in a situation to use the survival English prompts in a way they feel beneficial to them. Even if students are unable to respond to the questions, they at least learn how to manage interaction in a foreign language by employing some pre-decided expressions. Third, since all the questions are referential type-the answers unknown to teacher (Holland and Shortall 1997: 65; Richards and Lockhart 1996, Brown 1994: 166), students not only learn how to answer but they also learn how to negotiate meaning. The concept of *negotiation* or *modification of meaning* between interlocutors (Chaudron 1993: 130–131) or *modified interaction*, are *comprehension check*, *clarification request*, and *confirmation check*. The concept refers to those instances in an interaction in which the speaker and listener work together to determine that they are talking about the same thing: in other words, when the speaker carries out comprehension checks (‘Know what I mean?’) to determine whether he/she has been correctly understood, and when the listener requests clarification (‘What do you mean, she’s silly?’) or confirms that he/she has correctly understood (‘You stopped because you didn’t learn anything?’) (Nunan 1989: 45). The referential questions was assumed as promoting greater learner productivity (Chaudron 1993: 127) and involving efforts of both teacher and the learners (Thornbury 1996: 279–280); and it has been reported (Brock 1986 cited in Chaudron 1993: 173; Nunan 1991: 194) that learners responded to this type with significantly longer and more complex utterances. Furthermore, the referential questions could be associated with that of modified interaction as predicted by White (1997: 47) in terms of confirmation checks and clarification requests, and could be regarded as ... “successful classroom second language acquisition ...” (Nunan 1989: 47).

As regards the structure of an EFL classroom lesson, J. Willis (1995) makes a distinction in terms of *inner* and *outer*, where outer is reported to provide the framework of the lesson in which the language is used to socialize, organize, explain and check. The questions occupying the outer structure can be said to provide

motivation to listen to the real language. The excess of this communicative use of the language (Cullen 1998: 181) can be seen further in the form of his referential questions.

This is not the case merely with the natural speed questions project, basically in all teacher-student interactions and during all the classroom activities students interact with the teacher using the survival English prompts. Examples are the telephone interaction between the student (secretary) and the teacher (patient), and answering/acting on the student's commands in the doctor office such as 'take off your shirt', 'lie down on the table' etc. Moreover, as the students interact with the teacher on one-by-one basis all the students have a chance to practice with the teacher as opposed to the interaction with a group and the teacher. There is another element associated to the activity related to the speed of interaction. We may all guess that most of the teachers in ESL classes in general and in EFL classes with Japanese students in particular ask questions in slow and unnatural speed partially with the fear that students won't understand if they are asked in natural speed and partly because of the phenomenon of *speech modification*. It includes modification of, for instance, *rate of speech*, *wait-time*: the length the teacher waits after asking the question before calling on a student to answer it, rephrasing the question, directing the question to another student (Richards and Lockhart 1996: 188; Thornbury 1996: 283; Korst 1997: 280; Chaudron 1993: 128) and *pronunciation*, where in the latter case one of the aspects involves *self-repetition*. In contrast to the speech modification, all teacher-student interactions are based on non-modification of the linguistic features unless the students inquire to do so. In other words, the students have been prepared through specific training in listening and speaking in order to make them capable to handle interaction at work with non-Japanese patients. Furthermore, a special feature of classroom interaction is that they perform in front/presence of other students- a situation very similar to the one at work in clinics where a secretary is assumed to communicate in front of other Japanese.

Lastly, the materials have been designed in a way that with time they become more challenging for the students in the light of Krashen's (1987) theory of learning. For instance, the natural speed questions have been designed from simple through with more complicated structures and vocabulary in terms of *knowledge, comprehension, application, inference, analysis, synthesis and evaluation* (See Brown 1994: 166, and Materials Sample 2). In other activities students use the expressions without looking at the handouts, by adding non-linguistic features such as emotions, gestures and office manners.

4. 3 Unfamiliar words pronunciation

The most difficult part for any EFL Japanese student would be to make an attempt to pronounce an unfamiliar word even with communicable pronunciation. English used in clinics and dental offices and pharmacies are full of unfamiliar, longer and complex sound words because of its origin, for example, words drawn from Latin or German. How can an ESP learner communicate effectively in a foreign language if she/he is reluctant to pronounce authentic words of everyday use, depend on memorization or wait for the teacher to teach the correct pronunciation? Based on my own experience of teaching in Japan for about 30 years, Japanese students feel extremely challenging to read or pronounce a new word, and they don't seem to have any special training as such. Therefore, in this course students are especially trained to read new words making efforts by themselves and ensure with the teacher in an specially organized activity using (A) How do you pronounce (spell the word)? or (B) How do you pronounce (pronounce the word the way you know/ try)?. In using (B), students were first taught as how a word is divided in short sounds, for instance, emotion can be divided into e-mo-tion, but students are free to make their own choices for their convenience such as emo-tion. The project/activity has several advantages for the students: First, it teaches them to experiment their existing pronunciation and see whether it is correct. Most of the students use the expression (B). This may relate to their motivation and has its

foundation in the basic principles of language learning in that ‘students use their existing knowledge (emotion) to make the new information (emotion) comprehensible. This relates to the second language learning which is assumed to be a development process. According to Allwright (1978), learners must be decision makers. Students in this activity make decisions. They predict before listening the correct pronunciation (Widdoson 1978). It doesn’t take too much time for the students to master how to pronounce unfamiliar words, but it gives them much confidence in that they minimize or eliminate their fear or hesitation in reading new words independently. The activity also teaches the students to interact with the teacher on one-by-one basis and have them grown a habit of not only to interact, but also to initiate. Compare it with the traditional activity both in ESL and EFL classes in which a teacher first explains the pronunciation of new words and students just listen or repeat after the teacher in whole-class setting which always leave a question in mind ‘Do we know for sure which students pronounce correctly, not to mention make attempts to pronounce independently?’

4. 4 Course participants feedback

Hutchinson and Waters (1995) commenting concerning the relationship between ESP and motivation informs that students should have an internally generated want rather than an externally imposed need. Moreover, students should get satisfaction from actual experience of learning. The curriculum developed in this article was implemented in the classroom as suggested by the proponents of the classroom research that ‘claims made by Second Language Acquisition researches outside the classroom can be settled only by validating studies inside the classroom’ (Nunan 1991: 149, Ellis and Hedge 1993: 9–10, and Ellis 1997: vii–viii). At the end of the course, students were invited to provide their free opinions in Japanese about their actual experience of learning. In the light of the students’ feedback comments (see Appendix) this section will briefly discuss the extent to which the students felt satisfied with the entire curriculum.

Surprisingly, none of the 22 students had even a slight dissatisfaction with the course. On the contrary, all commented that they had a good learning experience during the course. As an evidence of these positive comments is that almost 98% of the students enrolled in the subsequent course. This indicates that the curriculum provided the students a feeling of success and satisfaction and hence sustains motivation as rightly commented by Willis (2001). The new students, that are the ones in the subsequent course, were inquired the reason of taking the course. They responded that the previous course participants had a satisfactory time and that they made recommendations for the course. The second positive comment by a majority was that the learning materials, methodology were practical, enjoyable, and attractive. Students also wrote that previously they disliked English but after taking this course their interests towards learning English grew up. Some students commented that the course helped them in learning how to pronounce unfamiliar words, and techniques of interacting in English. To sum up, what attracted students the most in the course was the teaching materials and methodologies. Most of the students seemed to have a negative experience of learning through a textbook. Since the current course did not prescribe a textbook, we have developed our own materials instead which could be the main reason of attracting them and the ones participated subsequently.

To this end, in all the projects theoretically how do the students learn? It can be argued that in the curriculum, implemented in a classroom, a student works on three operations and in the order of *comparing*, *noticing*, and *integrating*. For instance, in the ‘unfamiliar words’ pronunciation’ project a student compares his/her own pronunciation with the one from the teacher and hence notices a gap or realizes a weakness to overcome it next time by his own efforts. The process continues and integrates his/her attempts. In this regard, Ellis (1997: 119–123, 162), emphasizing the significance of input (also see Ellis and Hedge 1993: 8), states that the acquisition may be facilitated by teaching *explicit knowledge* through *Conscious Raising (CR)* tasks assisted by the

operations of noticing and comparing, which are considered necessary for acquisition to take place, and that the input can become *implicit knowledge* when the operation of integrating is added. Moreover, Willis (2001: 11) as regards ‘speaking’ informs that in order for anyone to learn a language with reasonable efficiency, three essential conditions must be met: *Exposure* to a rich but understandable input and real spoken language in use. *Use* of this language to do things and *motivation* to listen and to speak out. In the project of ‘natural speed listening’, students are exposed to a rich input of real spoken language (e.g. real-life authentic questions whose answers are unknown to the teacher – i.e. referential questions) to do things (i.e. respond to the questions in the way they feel comfortable), and motivation (e.g. to listen carefully and speak out). The students use their present knowledge and abilities to comprehend the input (i.e. questions). In the same way as above the students learn in the projects outlined in the previous section: For instance, in practicing ‘survival English prompts’ they first say an expression which is then repeated by the teacher. In all the projects of ‘medical secretary English’, students learn in the way as above when they practice with the teacher individually in front of classmates.

4. 5 Implications for medical offices English

The curriculum reported in this study was developed keeping in mind the language and content needs in the area of medical secretarial English studies. Strictly speaking, every ESP curriculum should be developed separately since the context, need, place and learners are specific. However, the curriculum reported in this study is flexible and can be employed with minor modification for English used for nurses, nurse-teacher-training staff, dental assistants, and welfare center workers.

Although the nature in all the above contexts are specific, they don’t seem to be unique in that they are not disconnected. In other words they have many common factors simply because they all deal with the same major field of medical sciences of everyday life. For instance, most of the routine work in medical offices have the same communicative functions: face-to-face encounters, telephone communication, medical insurance dealing, medicine instructions, and payment procedures. Furthermore, filling in the medical history forms have similarities. They all require some kinds of information but with different unique contents. Assuming this is the case, then all parts of the curriculum especially methodology, syllabus, and materials can be used with a minor modification; and other projects such as natural speed listening and associated survival English prompts can be used in the present forms. Nevertheless, what differs mainly is the specific medical terms and vocabulary. For related information in this regard see Niki et al. (2006), Onjou et al. (2007), Fujieda et al. (2005). Furthermore, for advanced information relating to *Career and Schools for Medical Secretaries*, consult the BrainTrack (2010). The contents, on this website, as an authentic and real-life material, can be helpful as a guideline for developing advance courses for a wide range of medical clinics English such as English for *Medical Assistant*, *Medical Office Secretary*, *Medical Receptionist*, and *Patient Coordinator*.

5. Conclusion

The article is an attempt to (i) develop an ESP curriculum specifically related to medical secretary English, (ii) implement to a classroom, and (iii) examine whether it would be helpful for learners. In this regard, employing a theoretical model of ESP materials’ design, first a need analysis is conducted to decide the contents of a syllabus. In view of the syllabus, materials are designed following the instructions given in the model. Lastly, the effectiveness of the curriculum is argued based on the ESP learning theories and feedback comments given by the course participants. Implications are discussed as regards how the curriculum can be used for a wider range of English required in medical offices such as English for nurses, nurse-teacher-training staff, dental as-

sistants and welfare office secretaries.

The learners may work productively if they feel that the learning material is (i) attractive in that it surprises the learner (Ellis 1997: 120), (ii) authentic in the form of ‘simplified’ text as suggested by Widdowson (cited in Jones 1994: 294), and (iii) processed in a game-like situation (Ellis 1997: 162), (iv) within groups (*ibid*: 109; and O’Sullivan 1994: 91). The curriculum reported in this study manifests all the above elements in the light of ESP learning theories and students’ feedback comments.

According to Drobic (cited in Hutchinson and Waters 1995: 59) concerning the need analysis, one should keep in mind that it is not once-for-all activity. It is a continuing process where the final results are checked and re-assessed. Therefore, further research in this area can be to re-perform the need analysis especially through formal or informal consultations with medical clinics staff, learners and department of the college which assists students to find jobs; and redesign the curriculum phases (e.g. syllabus) if necessary.

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メディカル秘書英語：学生の声

- C1: 将来、病院に就職する人も企業に就職する人も英語は必ず必要。または知っておいた方がよいものだと思います。
私は、この授業で「英語がうまく聞きとれないとき」「もう一度ゆっくり話してほしいとき」など、困ったときの対応の仕方を学びました。
まだまだ、英語はまったく話せませんが、英語に興味を持つことができました。
英語は楽しく学ぶことが大切だと感じました。
- C2: この授業は、英語の苦手な子でも全然大丈夫です。
私も最初、英語を話すことに抵抗があったけど、今では英語を話すことが楽しく思えて、自分の自信につながったと思います。
ファルク先生はとても優しく、楽しい先生です。
- C3: 今までやってきた英語の授業より楽しく、わかりやすく、馴染みやすいと思います。
「書く」授業ではなく、「話す」授業なので、とても楽しみながら学ぶことが出来ます。
英語が嫌いだった私でもこの授業のおかげで好きになりました。今英語が嫌いな人もきっと好きになれると思います。
- C4: 授業だけど、クラスの人々と仲良くなりながら英語も覚えられるので、楽しかった。
英語の言葉は簡単だけど大切な言葉を教えてくれるから、為になった。
教え方が上手なので、英語が苦手でも先生のやり方の英語は楽しかった。
コミュニケーションがいっぱいとれて、皆と仲良く英語の授業を受けることができた。
- C5: 英語を間違えても恥ずかしがらずにやることができた。
英語を楽しく学ぶことができ、英語が楽しかった。
ゲームを交えてやるので、リラックスして楽しく学ぶことができた。
普段使える英語だったので、役に立つと思った。
- C6: 中学や高校のような英語の授業とは違い、ゲーム感覚で楽しく、英語ができなくても全然心配ないです。あっという間に時間が過ぎていくし、自分の為にもなるのでおすすめの授業です。
- C7: ファルク先生の授業は、すごくたくさんの工夫がされていました。自分で話すようにして、英語への自信を持たせたりして、暗記や単語を書いて覚える事は全くしないで何回も繰り返し話し、自然と覚えることができました。
高校までの英語とは全く違い、ファルク先生のおかげで英語が少し好きになりました。
- C8: ファルク先生の授業はすごく楽しいし、人数が少ないからいっぱい話せて、すぐに出来るようになって良いと思う。
今までの英語と違って、楽しくコミュニケーションをとるという雰囲気があるから、知らない間にレベル UP している。
- C9: 私は英語が本当に苦手な嫌いでした。でも、ファルク先生の授業を受けて英語が好きになりました。
ファルク先生は今までの英語の先生とは違って、わかりやすいし、自分ができないところをで

きるようになるまで教えてくれるので、とてもやる気が出ます。

英語が苦手な人でも、ぜひ受けてみるといいと思います。

- C10: 英語の授業だからといって、構えなくていいです。
ファルク先生の授業は本当に楽しく英語が身につきます。「覚えよう」「書こう」とはせずに、自然と英語が頭に入っていきます。
少人数でやるので、みんなとも仲良くやれます。
- C11: ファルク先生はすごく優しくとても良い先生で、授業も生徒たちのことをいつも考えて進めてくれるので、とても楽しかった。
- C12: この授業は真面目に参加すれば確実に英語力が上がるし、すごく楽しい授業です。
私は以前、英語があまり得意ではなかったけど、自信がついたと思います。
- C13: 実際に何度も何度も話して覚えていくので、身につけやすいし、わからないことは聞けばわかりやすく教えてくれるので、すごく理解できます。
習う英語は、実際に使えるものばかりです。
- C14: 少人数だったのでとてもわかりやすい授業だったし、先生もフレンドリーなので、わからないことは聞きやすいし、楽しい雰囲気でも良かったです。
- C15: 英文を覚えるなどの難しいことはしないので、英語があまり得意じゃなくても、苦にならない授業だと思った。
実際に、今後使えそうな会話文をたくさん教えてもらえてためになった。
授業内容も興味を惹くようなものばかりで楽しかった。
- C16: 英語の授業は、教科書を見ていると眠くなるし、発音も苦手だから嫌いだけど、ファルク先生の英語はとても楽しかったです。
話ながら英語を学ぶということがわかりやすかったです。
- C17: 授業をやっていくうちに、だんだん自分から英語を話せるようになりました。
あまり授業という感じがなくて、楽しかったです。
- C18: ファルク先生が楽しく英語を教えてくれるので、英語が嫌いな人でもおすすめ！
ファルク先生はとても愉快で、おもしろいです。
- C19: メディカル秘書を目指している人なら、受けるべきだと思う。
今までの英語の授業とは全然違って、発音しやすいし、おもしろい授業です。
- C20: 最初は、英語の授業だから覚えなないといけないと思っていたけど、毎回繰り返ししゃべっているから勝手に英語が覚えられて楽しかった。
ゲーム感覚で覚えられるから苦手な人でも楽しめると思うし、病院に就職してから絶対に使える英語だから、病院に就職を考えている人はとった方がいい科目だと思います。
- C21: 英語の授業とは思えないくらい楽しかった。英語を学んでいるつもりじゃないのに、自然に英語を身につけることができる授業だと思う。
どんな好きな科目よりも好きになれるかも…!? ファルク先生が素敵。
普通の授業みたいに教科書を使わなかった。ファルク先生の授業は時間が経つのが早く感じます。
- C22: 最初は、何をしゃべっているのか全くわかりませんでした。日に日にわかるようになってきたのがうれしかったです。
時には間違えて理解してしまったけど、間違えることによって、より理解しようと努力するので、逆に間違った方がいいということも解りました。ありがとうございました。